

**Amendment to the Claims**

This listing of claims will replace all prior versions, and listings, of claims in the above-captioned application:

***Listing of the Claims:***

1. (Original): Method for identifying a subject at risk of developing hypertensive end organ damage, comprising:
  - (a) obtaining a biological sample of said subject;
  - (b) determining the level, of at least one non myocytical marker in said sample;
  - (c) comparing the level of said marker to a standard level; and
  - (d) determining whether the level of the marker is indicative of a risk. For developing hypertensive end organ damage.
2. (Currently amended): ~~Method as claimed in claim 1, The method of claim 1,~~ wherein the biological sample is a plasma sample derived from peripheral blood.
3. (Currently amended): ~~Method as claimed in claim 1 or 2, The method of claim 1,~~ wherein the non-myocytical marker is a protein.
4. (Currently amended): ~~Method as claimed in claim 3, The method of claim 3,~~ wherein the non-myocytical marker is galectin-3.
5. (Currently amended): ~~Method as claimed in claim 3, The method of claim 3,~~ wherein the non-myocytical marker is thrombospondin-2.
6. (Currently amended): ~~Method as claimed in any of the claims 1-5, The method of claim 1,~~ wherein the level of the marker is measured by an enzyme-linked immunosorbent assay (ELISA).

7. (Original): Use of one or more non-myocytal markers for identifying a subject at risk of developing congestive heart failure.
8. (Original): Use as claimed in claim 7, wherein the marker is a protein.
9. (Original): Use as claimed-in claim 8, wherein the protein is galectin-3.
10. (Original): Use as claimed in claim 8, wherein the protein is thrombospondin-2.
11. (Original): Use of galectin-3 and/or modulators thereof for the manufacture of a medicament for the prevention and/or treatment of hypertensive end organ damage.
12. (Original): Use of thrombospondin-2 and/or modulators thereof for the manufacture of a medicament for the prevention and/or treatment of hypertensive end organ damage.
13. (New): The method of claim 1, wherein the biological sample is a plasma sample derived from peripheral blood and wherein the non-myocytical marker is a protein.
14. (New): The method of claim 1, wherein the biological sample is a plasma sample derived from peripheral blood and wherein the level of the marker is measured by ELISA.
15. (New): The method of claim 1, wherein the non-myocytical marker is a protein and wherein the level of the protein is measured by ELISA.
16. (New): The method of claim 1, wherein the non-myocytical marker is galectin-3 and wherein the level of the galectin-3 is measured by ELISA.
17. (New): The method of claim 1, wherein the non-myocytical marker is thrombospondin-2 and wherein the level of the thrombospondin-2 is measured by ELISA.

18. (New): The method of claim 1, wherein the non-myocytical marker comprises galectin-3, thrombospondin-2, or combinations thereof, and wherein the level of the marker is measured by ELISA.

19. (New): The method of claim 1, wherein the biological sample is a plasma sample derived from peripheral blood, wherein the non-myocytical marker is a protein and wherein the level of the marker is measured by ELISA.

20. (New): The method of claim 1, wherein the biological sample is a plasma sample derived from peripheral blood, wherein the non-myocytical marker is a protein, galectin-3, thrombospondin-2, or combinations thereof, and wherein the level of the marker is measured by ELISA.